



U.S. DEPARTMENT OF COMMERCE
BUREAU OF THE CENSUS

FORM

CC-1608

1997 ECONOMIC CENSUS
CENSUS OF CONSTRUCTION INDUSTRIES

OMB No. 0607-0829: Approval Expires 10/31/99

DUE DATE
FEBRUARY 12, 1998

If you have questions about completing this report, please call or write the Census Bureau. In any communication, be sure to refer to the 11-digit Census File Number (CFN) printed in the label to the right. Return your completed form to:

BUREAU OF THE CENSUS
1201 East 10th Street
Jeffersonville, IN 47134-0001

Toll-free assistance, 8:00 a.m. to 8:00 p.m., eastern time, Monday through Friday:

1-800-233-6136

Please read the accompanying instruction guide before answering the questions.

Census use only

CC-1608

(Please correct any error in name, address, and ZIP Code)

YOUR RESPONSE IS REQUIRED BY LAW. Title 13, United States Code, requires businesses and other organizations that receive this questionnaire to answer the questions and return the report to the Census Bureau. By the same law, **YOUR CENSUS REPORT IS CONFIDENTIAL.** It may be seen only by Census Bureau employees and may be used only for statistical purposes. Further, copies retained in respondents' files are immune from legal process.

Item 1. EMPLOYER IDENTIFICATION NUMBER

Is the Employer Identification Number (EIN) shown in the label the SAME as that used for this establishment on its latest 1997 Employer's Quarterly Federal Tax Return, Treasury Form 941?

094 1 ☐ Yes

2 ☐ No – Enter current EIN (9 digits) →

			-					
--	--	--	---	--	--	--	--	--

Item 2. PHYSICAL LOCATION – Answer parts a–d (P.O. boxes or rural routes are not physical locations.)

a. Is this establishment's physical location the same as the address shown in the label?

093 1 ☐ Yes 2 ☐ No – Enter physical location below ↗

Number and street

City, town, village, etc.

State

ZIP Code

b. Is this establishment physically located inside the legal boundaries of the city, town, village, etc.?

095 1 ☐ Yes 3 ☐ No legal boundaries

2 ☐ No 4 ☐ Do not know

c. In what type of municipality is this establishment located?

096 1 ☐ City, village, or borough

2 ☐ Town or township

3 ☐ Other or do not know

d. In what COUNTY is this establishment located?

--

Item 3. OPERATIONAL STATUS

a. How many months during 1997 did this firm or organization actively operate this establishment?

Number of months

002

b. Mark (X) the ONE box which best describes this establishment at the end of 1997

Figures only

001 1 ☐ In operation

2 ☐ Temporarily or seasonally inactive

3 ☐ Ceased operation – Give date →

4 ☐ Sold or leased to another operator – Give date → AND enter name, etc., below ↗

Month	Day	Year

Name of new owner or operator

Number and street

City

State

ZIP Code

Item 4. ORGANIZATIONAL STATUS – Mark (X) the ONE box which best describes this establishment during 1997

003 1 ☐ Individual proprietorship

2 ☐ Partnership

3 ☐ Cooperative association (taxable)

4 ☐ Cooperative association (tax-exempt)

5 ☐ Government – Specify

0 ☐ Corporation (Do not mark if any form of cooperative association)

9 ☐ Other – Specify

If this establishment is primarily engaged in construction activities as shown on the Kind of Construction Activities List enclosed, then complete the entire questionnaire. Otherwise, complete items 5, 6, and 12, describe your business in item 13, and enter your name and telephone number in item 23.

Item 5. EMPLOYMENT IN 1997 – Your answers should be based on all employees included on your Employer's Quarterly Federal Tax Return, Treasury Form 941. Do not include your subcontractors or their employees.

During the pay periods including the 12th of March, May, August, and November 1997 –

a. how many construction workers were on the payroll of this establishment?

INCLUDE –

- Apprentices
- Journeymen
- Craftsmen
- Working foremen
- Job-site record keepers
- Laborers
- Truck drivers and helpers
- Equipment operators and mechanics
- Others engaged directly in construction

b. how many other employees were on the payroll of this establishment?

INCLUDE –

- Supervisors above working foremen
- Personnel staff
- Accounting staff
- Office staff
- Architects
- Engineers
- Purchasing agents
- Executives
- Others engaged in nonconstruction activities

c. how many total employees were on the payroll of this establishment?

Sum lines a and b

Number of employees of this establishment during the pay periods including the 12th of –			
March 1997	May 1997	August 1997	November 1997
101	102	103	104
105	106	107	108
109	110	111	112

YOUR RESPONSE IS REQUIRED BY LAW.

CONTINUE ON PAGE 2 ➡

HOW TO REPORT DOLLAR FIGURES	Report dollars rounded to thousands.	Millions (000)	Thou- sands (000)	Mark (X) if "0"	
	Example: If a value is \$1,025,739.00 – <i>REPORT</i> —————→	1	026	<input type="checkbox"/> 0	
	If a value is "0" (or less than \$500.00) – <i>MARK (X)</i> —————→			<input checked="" type="checkbox"/> 0	
Item 6. PAYROLL IN 1997 BEFORE DEDUCTIONS What were the annual payroll costs to this establishment for – <i>Exclude fringe benefits listed in item 8.</i>		Key	Mil.	Thou.	Mark (X) if "0"
a. construction workers (as defined in item 5a)?		117			<input type="checkbox"/> 0
b. other employees (as defined in item 5b)?		118			<input type="checkbox"/> 0
c. all employees? <i>Sum lines a and b</i>		119			<input type="checkbox"/> 0
Item 7. FIRST QUARTER PAYROLL IN 1997 What were the first quarter payroll costs (January to March) for all employees before deductions in 1997?		120	Mil.	Thou.	<input type="checkbox"/> 0
Item 8. EMPLOYER'S COST FOR FRINGE BENEFITS What were your employer costs of this establishment in 1997 for –			Mil.	Thou.	
a. legally required fringe benefits? <i>Include employer payments for Social Security, unemployment compensation, workman's compensation, and State disability programs, if required.</i>		121			<input type="checkbox"/> 0
b. voluntarily provided fringe benefits? <i>Include such items as payments for life insurance, medical insurance, pensions, welfare benefits, and union-negotiated benefits.</i>		122			<input type="checkbox"/> 0
c. all fringe benefits? <i>Sum lines a and b</i>		123			<input type="checkbox"/> 0
Item 9. CONSTRUCTION WORK SUBCONTRACTED OUT What was the total cost to this establishment for construction work subcontracted out in 1997? <i>Exclude the cost of materials purchased by this establishment for subcontractors.</i>		124	Mil.	Thou.	<input type="checkbox"/> 0
Item 10. MATERIALS, COMPONENTS, AND SUPPLIES What were the job-site, general office, and all other costs to this establishment for materials, components, and supplies in 1997? <i>Include the cost of materials purchased by this establishment for subcontractors.</i> <i>Exclude the cost of –</i> <ul style="list-style-type: none">items purchased by this establishment that were installed in a building but were not part of its structure, such as production machinery, furniture, etc.items listed in item 11.		125	Mil.	Thou.	<input type="checkbox"/> 0
Item 11. SELECTED COSTS What were the job-site, general office, and all other costs to this establishment in 1997 for – <i>Where items are combined on your books, separate estimates are preferred.</i>			Mil.	Thou.	
a. purchased electricity?		126			<input type="checkbox"/> 0
b. natural gas and manufactured gas (propane)?		127			<input type="checkbox"/> 0
c. gasoline and diesel fuel – ON highway?		128			<input type="checkbox"/> 0
d. gasoline and diesel fuel – OFF highway?		129			<input type="checkbox"/> 0
e. all other fuels and lubricants, including heating oils, lubricating oils and greases?		130			<input type="checkbox"/> 0
f. communication services, including telephone, pager, data transmission, fax, and related service contracts?		131			<input type="checkbox"/> 0
g. purchased maintenance and repair of construction equipment and tools; machinery; office equipment, furniture, and vehicles, including related service contracts?		132			<input type="checkbox"/> 0
h. purchased maintenance and repair of buildings, job-site trailers, and other structures? <i>Exclude janitorial services.</i>		133			<input type="checkbox"/> 0
i. the rental or lease of construction equipment and tools; machinery; office equipment, furniture, and vehicles? <i>Exclude capital leases (leases with a contract to own at the end of the lease).</i>		134			<input type="checkbox"/> 0
j. the rental or lease of buildings, job-site trailers, and other structures? <i>Exclude capital leases (leases with a contract to own at the end of the lease).</i>		135			<input type="checkbox"/> 0
Item 12. DOLLAR VALUE OF BUSINESS DONE IN 1997 For this establishment in 1997 –			Mil.	Thou.	
a. (1) what were the receipts (or billings) for construction work done for others? <i>Include receipts (or billings) derived from contract construction, design-build contracts, and construction management.</i> <i>Exclude the cost of items purchased by this establishment that were installed in a building but were not part of its structure, such as production machinery, furniture, etc.</i>		136			<input type="checkbox"/> 0
(2) what was the estimated dollar value of construction work done on residential and other building projects which you sold or intended to sell, rent, or lease? <i>INCLUDE the estimated dollar value of –</i> <ul style="list-style-type: none">all improvements to land associated with these building projects done by or for you in 1997.work actually done in 1997, whether buildings were sold or not.subdividing and preparing your own land into lots. <i>EXCLUDE the estimated dollar value of –</i> <ul style="list-style-type: none">land. Even though land would generally be included in the value of your building project, the value of the land is not considered construction work done.		137			<input type="checkbox"/> 0
(3) what was the total dollar value of construction work done? <i>Sum lines (1) and (2)</i>		139			<input type="checkbox"/> 0
b. what were the receipts for all other business activities done by this establishment in 1997? <i>INCLUDE –</i> <ul style="list-style-type: none">architectural services, except the design portion of integrated design-build contractsengineering servicesmanufacturingminingrental or lease of propertiesreal estate commissions and property management feesrental of construction machinery or equipment to others, without an operatorretail tradetransportationwholesale tradeother business activities		140			<input type="checkbox"/> 0
c. what was the total dollar value of all business done by this establishment in 1997? <i>Sum lines 12a(3) and 12b</i>		141			<input type="checkbox"/> 0

If not shown, please enter your 11-digit Census File Number from the address label on page 1

Census File Number

HOW TO REPORT PERCENTAGES

Report percents rounded to whole percents.
Example: If figure is 38.8% – REPORT

Percent
39 %

Item 13. KIND OF BUSINESS IN 1997

What percent of the amount that you reported in item 12c (the total dollar value of business done in 1997) was due to –

a. each of the following construction activities? (As reported in item 12a)

Highway and street contractor – construction of highways, streets, airport runways, and related work

Paving contractor – asphalt or concrete for highways, streets, and airport runways

Blasting contractor, except building demolition

Cable and conduit laying contractor

Dredging contractor

Excavating, earthmoving, or land clearing contractor, connected with buildings

Excavating, earthmoving, or land clearing contractor, not connected with buildings

Heavy construction contractor – construction of bridges, tunnels, water, sewer, and other utility lines, power plants, sewer and water treatment plants, and heavy industrial complexes

Pile driving contractor

Trenching contractor

Construction management

Rental of construction machinery or equipment to others, with an operator

Other kinds of construction – Refer to list of construction activities – Specify kind(s) of construction and enter code(s)

b. each of the following other business activities? (As reported in item 12b)

Engineering services

Manufacturing – products manufactured and sold to others – Specify kind

Mining – minerals produced and sold to others

Rental of construction machinery or equipment to others, without an operator

Retail trade – Specify kind

Transportation of goods for others (e.g., dirt hauling)

Wholesale trade – Specify kind

Other business activities – Specify kind

The sum of the percentages reported should equal 100%.

Item 14. TYPE OF CONSTRUCTION

What percent of the amount you reported in item 12a(3) (the dollar value of construction work done by this establishment in 1997) involved the following types of construction? Report these percentages in column (1) of the table below. Then in columns (2), (3), and (4) allocate this percent according to the three categories of construction. The sum of columns (2) through (4) should equal the entry in column (1). Refer to the Instruction Guide for a step by step example and for definitions of the three categories of construction.

Type of construction	Percent of dollar value of construction work done		Three categories of construction					
	Key	(1)	Key	(2)	Key	(3)	Key	(4)
BUILDING CONSTRUCTION								
Single-family houses, detached	316	%	416	%	516	%	616	%
Single-family houses, attached	317	%	417	%	517	%	617	%
Manufacturing and light industrial buildings, such as factories, assembly plants, and industrial research laboratories	321	%	421	%	521	%	621	%
Office buildings	324	%	424	%	524	%	624	%
Other commercial buildings, such as stores, restaurants, and automobile service stations	325	%	425	%	525	%	625	%
Other nonresidential buildings – Specify kind	238		438	%	538	%	638	%
NONBUILDING CONSTRUCTION								
Highways, streets, and related work, such as installation of guardrails, highway signs, etc.	341	%	441	%	541	%	641	%
Airport runways and related work	342	%	442	%	542	%	642	%
Private driveways and parking areas	343	%	443	%	543	%	643	%
Bridges and elevated highways	346	%	446	%	546	%	646	%
Tunnels: highway, pedestrian, railroad, etc.	347	%	447	%	547	%	647	%
Sewers, sewer lines, septic systems, and related facilities	351	%	451	%	551	%	651	%
Water mains and related facilities	352	%	452	%	552	%	652	%
Pipeline construction other than sewer or water lines	353	%	453	%	553	%	653	%
Power and communication lines, cables, towers, and related facilities	354	%	454	%	554	%	654	%
Power and cogeneration plants, except hydroelectric	356	%	456	%	556	%	656	%
Power plants, hydroelectric	357	%	457	%	557	%	657	%
Blast furnaces, petroleum refineries, chemical complexes, etc.	358	%	458	%	558	%	658	%
Sewage treatment plants	361	%	461	%	561	%	661	%
Water treatment plants	362	%	462	%	562	%	662	%
Urban mass transit: subways, streetcars, and light rail systems	366	%	466	%	566	%	666	%
Railroad construction	367	%	467	%	567	%	667	%
Conservation and development construction including irrigation projects, drainage canals, levees, and flood control projects	368	%	468	%	568	%	668	%
Dam and reservoir construction	371	%	471	%	571	%	671	%
Dry/Solid waste disposal such as landfills	372	%	472	%	572	%	672	%
Harbor and port facilities	373	%	473	%	573	%	673	%
Marine construction including dredging, underwater rock removal, navigational channels, locks, etc.	374	%	474	%	574	%	674	%
Recreational facilities, such as athletic fields, golf courses, outdoor tennis courts, trails or camps	381	%	481	%	581	%	681	%
Oilfields	385	%	485	%	585	%	685	%
Other nonbuilding construction – Specify kind	288		488	%	588	%	688	%
TOTAL value of construction work done in 1997 Sum of columns (2), (3), and (4) TOTALS should equal 100% in column (1).	100 %		400	%	500	%	600	%

CONTINUE ON PAGE 4

Item 15. OWNERSHIP OF CONSTRUCTION PROJECTS

What percent of the amount you reported in item 12a(3) (the dollar value of construction work done by this establishment in 1997) was on projects owned by the following?

Private businesses and individuals

State and local governments

Federal Government

Key

Percent

801

802

803

100

%

Item 16. CONSTRUCTION WORK DONE AS A SUBCONTRACTOR

What percent of the amount that you reported in item 12a(3) (the dollar value of construction work done by this establishment in 1997) represents work you did for other contractors or builders? Enter "0" if you did not subcontract work from other contractors or builders.

Key

Percent

805

%

Item 17. STATES IN WHICH CONSTRUCTION WORK WAS DONE IN 1997

What percent of the amount that you reported in item 12a(3) (the dollar value of construction work done by this establishment in 1997) occurred in each State?The sum of the percentages reported should equal 100%.

State	Percent	State	Percent	State	Percent	State	Percent	State	Percent	State	Percent
AL	701	FL	712	LA	722	NE	731	OK	740	VT	750
AK	702	GA	713	ME	723	NV	732	OR	741	VA	751
AZ	704	HI	715	MD	724	NH	733	PA	742	WA	753
AR	705	ID	716	MA	725	NJ	734	RI	744	WV	754
CA	706	IL	717	MI	726	NM	735	SC	745	WI	755
CO	708	IN	718	MN	727	NY	736	SD	746	WY	756
CT	709	IA	719	MS	728	NC	737	TN	747	US	100%
DE	710	KS	720	MO	729	ND	738	TX	748		
DC	711	KY	721	MT	730	OH	739	UT	749		

Item 18. ASSETS, CAPITAL EXPENDITURES, AND DEPRECIATION IN 1997

What was the dollar value of assets, capital expenditures, and depreciation for this establishment in 1997?

a. Gross value of depreciable assets (usually original costs) at the BEGINNING of 1997

b. Capital expenditures for NEW and USED depreciable assets in 1997

c. Gross value of depreciable assets sold, retired, scrapped, destroyed, etc. in 1997

d. Gross value of depreciable assets at the END of 1997 (should equal lines a+b-c=d)

e. Depreciation charges for 1997

Key

Mil.

Thou.

Mark (X) if "0"

813

816

824

827

830

Item 19. INVENTORIES OF THIS ESTABLISHMENT AT END OF YEAR

What was the value of inventories for this establishment at the end of 1996 and 1997 for materials and supplies?

NOTE: Exclude work in progress and finished units not sold.

End of 1996

End of 1997

Key

Mil.

Thou.

Mark (X) if "0"

Key

Mil.

Thou.

Mark (X) if "0"

831

832

Item 20. OWNERSHIP OR CONTROL – Answer item 20 only if your Census File Number (CFN), shown in the address label of this report form, begins with a zero.

a. Does another domestic company own more than 50% of the voting stock of this company OR have the power to direct the management and policies of this company?

097

1

Yes – Enter owning or controlling company's name, address, ZIP Code, and EI number

2

No

Name

EI Number

Number and street

City

State

ZIP Code

b. Does this company own more than 50% of the voting stock of any other domestic companies OR have the power to direct the management and policies of any other domestic companies?

If more space is needed, attach a separate sheet.

098

1

Yes – Enter owned or controlled company's name, address, ZIP Code, and EI number

2

No

Name

EI Number

Number and street

City

State

ZIP Code

Item 21. Not applicable to this report.

Item 22. NONRESIDENTIAL DESIGN-BUILD

What percent of the amount that you reported in item 12a(3) (the dollar value of construction work done by this establishment in 1997) represents DESIGN-BUILD work you did on NONRESIDENTIAL buildings and structures? Enter "0" if you did not work as a design-builder. Do not include work done on residential buildings, such as single-family houses and apartment buildings.

Key

Percent

846

%

COMMENTS – Please use this space for any explanation that may be essential in understanding your reported data.

Item 23. CERTIFICATION – Print or type

Period covered by this report

FROM: Mo. Year

TO: Mo. Year

Name of person to contact regarding this report

Contact person's position or title

Telephone

Area code

Number

Extension

Email or Internet address

Fax

Area code

Number

This report is substantially accurate and has been prepared in accordance with the instructions.

Signature

Date

PLEASE PHOTOCOPY THIS REPORT FOR YOUR RECORDS